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PYO/SB/22 (12-04)
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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | | | | | Docket Number (Optional) 85804-014501 | | | |
|-----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------|-------------------------------|-----------|---------------------------------------------------------|--------------|------------|--|
| FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | | | | | 03054-014301 | | | |
| Application Number 09/846,823 | | | | | | Filed April 30, 2001 | | | |
| For R | ELAT | TIONS | IIP DISCOVERY ENGINE | | | | | | |
| Art Unit 3622 | | | | | | Examiner Yehdega Retta | | | |
| This | is a re | quest u | nder the provisions of 37 CFR 1.13 | 36(a) to extend the p | eriod for | filing a reply | in the above | identified | |
| | cation eques | | ension and fee are as follows (chec | ck time nariod desire | d and ar | ter the appr | andota faa h | playett. | |
| | e requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | | | | | | |
| | | | | <u>Fee</u> | Small E | Entity Fee | | | |
| | \boxtimes | One | month (37 CFR 1.17(a)(1)) | \$120 | | \$60 | \$ | 120.00 | |
| | | Two | months (37 CFR 1.17(a)(2)) | \$450 | \$ | \$225 | \$ | | |
| | | Three | e months (37 CFR 1.17(a)(3)) | \$1020 | \$ | \$510 | \$ | | |
| | | Four | months (37 CFR 1.17(a)(4)) | \$1590 | ş | \$795 | | | |
| | | Five r | nonths (37 CFR 1.17(a)(5)) | \$2160 | \$ | 1080 | \$ | | |
|] / | Applicant claims small entity status. See 37 CFR 1.27. | | | | | | | | |
|] / | A check in the amount of the fee is enclosed. | | | | | | | | |
| | Payment by credit card. Form PTO-2038 is attached. | | | | | | | | |
| ☒ . | The Director has already been authorized to charge fees in this application to a Deposit Account. | | | | | | | | |
| ⊠ † | The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-2638. I have enclosed a duplicate copy of this sheet. | | | | | | | | |
| ŀ | WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | | | | |
| am t | n the 🔲 applicant/inventor. | | | | | | | | |
| | assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). | | | | | | | | |
| | attorney or agent of record. Registration Number 39,000 | | | | | | | | |
| | attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 | | | | | | | | |
| (| aù | aous | | | | ay 9, 2006 | | | |
| Carole A. Quinn | | | | | | | Date | | |
| Typed or printed name | | | | | | <u>14) 708-6500</u> 5/1 9/2806^T9 # | | | |
| OTE: S gnalure | ignature is recu | e of all th | e inventors or assignees of record of the ent below. | ire interest or their reptese | | | | | |
| | | , | rms are submitted. | | | | | | |

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and cubmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-800-PTO-6199 and select option 2

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